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TRANSMITTAL FORM			s are required to respond to a confidence of the second tension	10/749 Decen Philip:	Approved for use through 07/31/2006. OMB 0651-0031 atent and Trademark Office; U.S. DEPARTMENT OF COMMERCE action of information unless it displays a valid OMB control number. 10/749,342 December 31, 2003 Philip S. Ng et al. 2816 K.B. Wells		
(to be used for all correspondence after initial filing) Total Number of Pages in This Submission 5			Attorney Docket Number		ATM-299		
ENCLOSURES (Check all that apply)							
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement		Remar	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD		After Appe of Ap Appe (Appe (Appe Definition Appe (Appe Definition Appe (Appe Appe Appe Appe Appe Appe App	,	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm Name	Law Offices of Schneck & Schneck						
Signature Printed name	Thomas Schneck						
Date	May 2, 2005		Reg. No.	Reg. No. 24,518			
CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature							
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Date May 2, 2005

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE ction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818). Application Number 10/749.342 TRANSMITTA Filing Date December 31, 2003 For FY 2005 Philip S. Ng et al. First Named Inventor K.B. Wells **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2816 TOTAL AMOUNT OF PAYMENT (\$) 0.00 Attorney Docket No. ATM-299 METHOD OF PAYMENT (check all that apply) Credit Card Check Money Order None Other (please identify): Deposit Account Name: Schneck & Schneck ✓ Deposit Account Deposit Account Number: 19-0590 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES SEARCH FEES **EXAMINATION FEES FILING FEES** Small Entity Small Entity Small Entity Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 300 200 Utility 150 500 250 100 Design 200 100 100 50 130 65 Plant 200 100 300 160 80 150 600 300 500 300 Reissue 150 250 Provisional 200 100 O 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) **Fee Description** Fee (\$) Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 25 100 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 180 Multiple dependent claims Multiple Dependent Claims **Total Claims Extra Claims** Fee Paid (\$) - 20 or HP = 0 0.00 Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20 Fee Paid (\$) Extra Claims Fee (\$) 0.00 _ - 3 or HP = _0 HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof **Total Sheets** Extra Sheets Fee Paid (\$) (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other: SUBMITTED BY Registration No. 24,518 Telephone (408) 297-9733 Signature (Attorney/Agent)

)

Name (Print/Type)

Thomas Schneck

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Philip S. Ng et al.

PATENT APPLICATION

Serial No.: 10/749,342

Group Art Unit: 2816

Filed: December 31, 2003

Examiner: K.B. Wells

For: CIRCUIT FOR AUTO-CLAMPING INPUT PINS

TO A DEFINITE VOLTAGE DURING POWER-UP OR RESET

Response to Office Action

Hon. Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir or Madam:

In response to the Office action mailed February 23, 2005, please amend the above-identified application as follows.